

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, on the front if space permits.

1. Article Addressed to:

Hershel Slaughter, #363-213
Warren Correctional Institute
P.O. Box 120
Cebanon, OH 45036-0120

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
 ☐ Addressee

B. Received by (Printed Name) ☐ Addressee
M.A. Cates ☐ Date of Delivery
3/6/04

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7003 1680 0000 0330 4542
(Transfer from service label)